

# Employer Direct User Authorisation

## When should I use this form?

Please complete this form to provide details of team members that will require access to Employer Direct and specify the level of access they will need. Please print additional copies of this page if required. Completed forms are to be sent to **employer@qsuper.qld.gov.au**

## Access types

Functions	Administrator role	Clerical role	Read only role
Edit and delete users	✓		View only
Change employer contact details	✓		View only
View bank account details	✓	✓	✓
Edit files	✓	✓	View only
Submit files and payment advice	✓		
Create reports	✓	✓	✓

### 1 User details

Name

Employer  Phone number

Email address

Access type

Employer identification number (to be provided by QSuper)

### 2 User details

Name

Employer  Phone number

Email address

Access type

Employer identification number (to be provided by QSuper)

### 3 User details

Name

Employer  Phone number

Email address

Access type

Employer identification number (to be provided by QSuper)

### 4 User details

Name

Employer  Phone number

Email address

Access type

Employer identification number (to be provided by QSuper)